

EARLY START (NEW ZEALAND)

The Early Start (New Zealand) home visiting model meets the criteria established by the U.S. Department of Health and Human Services (DHHS) for an “evidence-based early childhood home visiting service delivery model,” because there is at least one high- or moderate-quality impact study with favorable, statistically significant impacts in two or more of the eight outcome domains. At least one of the impacts is from a randomized controlled trial and has been published in a peer-reviewed journal. At least one of the impacts was sustained for at least one year after program enrollment.

This short report provides summary information about the program model, research on evidence of effectiveness, and model developer contact information. A full model report and implementation profile will be available on the Home Visiting Evidence of Effectiveness (HomVEE) website (<http://homvee.acf.hhs.gov/>) by fall 2012.

Program Model Description

Early Start is a voluntary home visiting program designed to improve child health; reduce child abuse; improve parenting skills; support parental physical and mental health; encourage family economic well-being; and encourage stable, positive partner relationships. Early Start targets at-risk families with newborns and children up to age 5. Home visitors with an educational background in nursing, social work, early childhood education, teaching, or related fields deliver services at varying levels of intensity depending on the family’s needs. Home visitors in consultation with their supervisors determine when a family is ready to progress to the next level. Early Start is currently being implemented in the Christchurch area of New Zealand.

Early Start Project Ltd., a charitable nongovernmental organization based in New Zealand, provides implementation support. Home visitors undergo four weeks of training that provides background on a wide range of issues relevant to family support work. Each home visitor must receive a minimum of 20 hours of in-service training per year. Training materials and trainers are available through Early Start Project Ltd.

Early Start uses a three-stage eligibility determination process. First, Early Start administers a short risk assessment containing items on maternal age, extent of family support, whether the pregnancy was planned or unplanned, substance abuse, family violence, and child abuse and neglect. Any family with two or more risk factors continues to the next stage of the process. Second, families enroll in Early Start for a one-month assessment period to become acquainted with the program and so Early Start can learn about the family. Third, families complete an in-depth needs assessment based on a modified version of the Kempe Family Stress Checklist and are fully enrolled in the program for longer-term services.

All Early Start families receive services based on four established curricula: (1) Partnership in Parenting Education (PIPE) “Listen, Love, Play,” which focuses on listening, trust, language, problem solving, feelings, and how babies learn; (2) Triple P (Positive Parenting Program), which focuses on positive parenting practices and means to address childhood behavior problems; (3) Getting Ready for School focused on 4-year-olds; and (4) Incredible Years. Families are offered several additional services based on need. These may include infant and child safety awareness; linkages to supportive services in the community, including budget, health, and relationship services;

advice and support concerning healthy lifestyle choices, including family and child nutrition; and household and time management.

Early Start includes four levels of service intensity: Level 1 High need, for which up to three hours of home visiting per week is provided; Level 2 Moderate need, receiving up to three hours of home visiting per two-week period; Level 3 Low need, receiving up to one hour of home visiting per month; and Level 4 Graduate, receiving up to one hour of contact (telephone/home visitation) per three months. All families enter the program at Level 1 and move to higher levels over time based on their progress. Level changes are determined by home visitors in consultation with their supervisors. Families can continue to receive services until the child reaches age 5.

Review of Studies and Evidence of Effectiveness

The HomVEE review identified three studies of Early Start (New Zealand) published between 1979 and 2011. All were eligible for review: two received a moderate rating and one was an additional source and was not rated.

The same sample was used across all studies that received a moderate rating. Initially, 443 families were randomly assigned: 220 to Early Start and 223 to the comparison group. A total of 391 families participated in the study at 36 months after program enrollment. Most were low-income, unmarried, and expecting their first child. Approximately one-fourth of the analysis sample was Maori (an indigenous tribal group in New Zealand); weekly income in both the Early Start and comparison groups averaged about \$340 per week (New Zealand dollars; according to information provided by the authors).

Taking into account all of the review results as of January 2012, Early Start (New Zealand) had favorable impacts on the child development and school readiness, child health, positive parenting practices health, and reductions in child maltreatment domains. Specifically, Early Start had favorable impacts for the following 11 variables: number of visits made to family doctor in the past 36 months, percentage of children up to date with well-child checks, percentage of children that attended hospital for accident/injury or accidental poisoning, percentage of children with dental service, total internalizing behaviors score, total overall (internalizing and externalizing) behaviors score, duration of attendance at early childhood education program, percentage of children with severe or very severe assault by any parent, positive parenting attitude, nonpunitive parental attitude, and total parenting score.

Model Developer Contact Information

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References

Impact Studies with High Ratings

None

Impact Studies with Moderate Ratings

Fergusson, D. M., Horwood, L. J., Grant, H., & Ridder, E. M. (2005). Early Start evaluation report. Christchurch, NZ: Early Start Project Ltd.

Additional Source:

Fergusson, D. M., Grant, H., Horwood, L. J., & Ridder, E. M. (2006). Randomized trial of the Early Start program of home visitation: Parent and family outcomes. *Pediatrics*, 117(3), 781-786. doi:10.1542/peds.2005-1517

Fergusson, D. M., Grant, H., Horwood, L. J., & Ridder, E. M. (2005). Randomized trial of the Early Start program of home visitation. *Pediatrics*, 116(6), e803-e809.

Impact Studies with Low Ratings

None

Implementation Studies

None